
Orthodox Medicine Humanistic Medicine Holistic Health Care

IN THE December 1979 issue the editors of THE WESTERN JOURNAL OF MEDICINE began a forum for dialogue and discussion of orthodox medicine, humanistic medicine and holistic health care. The forum was initiated with statements by persons known to have an interest in and knowledge of this subject, and readers were invited to submit their views constructively and succinctly. All of the material, published and unpublished, will be collated and, if possible, a distillate will be prepared to summarize the dialogue and discussion.

—MSMW

A Comprehensive Approach to Patient Care

AUGUSTUS S. ROSE, MD

THE EDITORS are to be commended for opening discussion on "Orthodox Medicine, Humanistic Medicine and Holistic Health Care." The articles in the December 1979 issue and the responding forum statements are interesting and informative. They provide physicians who are genuinely concerned with the best in patient care a broadening of perspectives, and an opportunity to understand how others think about the complex and sometimes controversial ideas extant in modern health care. Being of a comparable "vintage" and with a similar orientation, I am particularly attracted to the statements "Care of the Patient" by Louis K. Diamond, MD and "A Balance of Science and Art" by Dwight L. Wilbur, MD, which appeared in the January issue. Orthodox medicine when viewed with the interpretation of these men surely has no reason to feel challenged by the

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trends in health care as proposed by humanistic medicine and holistic health care. *Good* physicians who seek to practice the art of medicine incorporate most, if not all, of the principles involved.

The art of medicine, revered in concept and recognized as a strong, beneficial influence in patient care, has never found a place in the curricula of medical education. It is said that the art of medicine cannot be defined with accuracy, cannot be measured objectively and cannot be taught except by example. In general, the art of medicine is *explained* as a professional and personal attribute that is acquired by only a few physicians. In the context of the discussions concerning modern medical practice, it is suggested that young physicians who seek to gain a comprehensive approach to patient care can with motivation acquire many of the skills and attributes that fall into the category of the art of medicine. Yet, because of the reasonable and appropriate influence of scientific medicine the present-day physician should have justification and understanding about how certain personal and professional qualities in practice become effective in the therapeutic process.

As pointed out by several writers in this series, modern medicine, which had its origin in close association with religion and religious beliefs, still retains, despite the advances of scientific medicine, a basic relationship that is in the realm of the spiritual. Those who are ill, without knowledge and often in desperation, look to *higher powers* as well as to those who are credited with knowledge and experience. In this sense and regardless of how this attitude may be camouflaged in modern times, the one who in distress turns to the physician for help is a *suppliant*—admitting dependence and acknowledging readiness for information and desire for help. This places the physician in an advantageous position and almost regardless of the nature of the therapies or ministrations, if thoughtfully and confidently prescribed, a degree of comfort and benefit will result. It is within this concept that various systems and therapies, both those with and those without a scientific basis, appear to gain the first measure of success. Excepting the specifics in metabolic and nutritional deficiencies, certain infections and the like, and the exquisite skills of modern surgery, success in medical practice depends in large part on how a therapist develops

and utilizes the confidence that is engendered in the patient.

Medicine and medical science have been prone to explain these circumstances by citing a placebo effect. But as has now been shown,¹ at least in the area of pain research, a placebo when administered confidently and authoritatively will in many instances generate the production of peptides within the central nervous system which activate opiate receptors and bring pain suppression. These effects and those of other therapies, therefore, can be understood as resulting from the activation of native physiological mechanisms within the nervous system. And, since the nervous system—mind and emotions—not only regulates behavior in relationships to the outside world but also has strong and directive influence over internal bodily functions, a therapist who provides the patient with information and administers appropriate methods of treatment takes advantage of innate physiology that has the capability to assist in recovery from tissue injury and disease and in making adjustments to disability.

It behooves practicing physicians to strive toward understanding the total life situation of each patient and to thoughtfully gain the patient's confidence and encourage belief in the modes of therapy while also utilizing up-to-date knowledge in patient care.

REFERENCE

1. Levine JD, Gordon NC, Fields HL: The mechanism of placebo analgesia. *Lancet* 2:654-657, Sep 23, 1978

Holism and Socioeconomic Reality

STEPHEN R. LEMKIN, MD

THE MOUNTAIN OF VERBIAGE about "holistic" medicine in recent issues of the journal misses the point, I think, almost entirely. The yearning of our patients for the holistic approach is symptomatic of a general discomfiture with current socioeconomic reality rather than a symptom of a dying medical care system.

One of the reasons for the triumph of orthodox medicine over competing systems in the early part of this century was that orthodox medicine at the

time was essentially holistic. Much of medical care centered on the family doctor who made his often meager living by attending to overall emotional, social and medical needs of patients he knew rather intimately. I remember my family doc coming to the house when I was a child to treat some minor illness in the family, usually without any specific or sophisticated therapy, following which he would sit over a cup of tea discussing current family and neighborhood crises and offer his wisdom. As he left, my mother would force him to take two or three dollars. This, I submit, is essentially the concept of holistic medicine shed of its pretentiousness and pseudo-sophistication. Remember, though, in those years we also had a "holistic" milkman, a "holistic" grocer and so on.

In the last 20 years medicine and *all other service institutions* of American society have evolved away from this wistfully remembered state for basically socioeconomic reasons. The truth is that there are no family docs like that any more and no milkmen like that any more. As has been pointed out by others, the postwar years have provided an explosion of relative wealth, despite inflation, to most members of the middle class, and we have come to expect it. With the proliferation of medical technology at the same time, a lucrative industry has developed which focuses on the use of such technology and which has naturally generated the system of expensive medical specialization most of us emulate and participate in. The result is, I think, that the average physician now is relatively wealthier than his predecessor and he is without the economic need to provide old-fashioned "holistic" care. The same is true of the corner supermarket and the corner plumber.

The real danger is that those who decry this social change, whether for altruistic reasons or not, would like to focus on Medicine as the villain, rather than our postwar socioeconomic environment as a whole. This is easy and tempting to do because we practicing physicians are visibly affluent, the medical care we provide is painfully and burdensomely expensive, and yet we are somehow expected to conform to a set of standards harking back to simpler days.

For idealists who believe in the return to the holistic, unfragmented, personal approach to medical care, there is a real economic dilemma. A friend of mine, fully trained in internal medicine, opened a practice for holistic care more than

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